Entered 11/02/15 22:59:19 Desc Main Case 14-31618-KLP Doc 32 Filed 11/02/15 Page 1 of 7 Document

Debtor 1 Kenno	th R. Langston, Jr.		
	rly L. Langston		
Spouse, if filing)	, go		
United States Bankruptcy Cou	for the: EASTERN DISTRIC	CT OF VIRGINIA	
Case number 14-31618			Check if this is:
f known)		_	☐ An amended filing
			☐ A supplement showing post-petition chapte 13 income as of the following date:
<u>Official Form B 6I</u>			MM / DD/ YYYY
Schedule I: Your	Income		12/
pouse. If you are separated a	nd your spouse is not filing	iling jointly, and your spouse is li with you, do not include informat	and Debtor 2), both are equally responsible for ring with you, include information about your on about your spouse. If more space is needed d case number (if known). Answer every questi
pouse. If you are separated a ttach a separate sheet to this Part 1: Describe Emplo	nd your spouse is not filing form. On the top of any add	iling jointly, and your spouse is li with you, do not include informat itional pages, write your name an Debtor 1	ring with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every questi
pouse. If you are separated a ttach a separate sheet to this Part 1: Describe Emplo 1. Fill in your employment information. If you have more than one	nd your spouse is not filing form. On the top of any add ment	iling jointly, and your spouse is li with you, do not include informat itional pages, write your name an Debtor 1 Employed	ving with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every questi Debtor 2 or non-filing spouse Employed
pouse. If you are separated a ttach a separate sheet to this Part 1: Describe Emplo I. Fill in your employment information. If you have more than one attach a separate page wiinformation about addition	nd your spouse is not filing form. On the top of any add ment job, h Employment status	iling jointly, and your spouse is li with you, do not include informat itional pages, write your name an Debtor 1	ring with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every questi
pouse. If you are separated a ttach a separate sheet to this Part 1: Describe Emplo 1. Fill in your employment information. If you have more than one attach a separate page wi	nd your spouse is not filing form. On the top of any add ment job, h Employment status	iling jointly, and your spouse is li with you, do not include informat itional pages, write your name an Debtor 1 Employed	ving with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every questi Debtor 2 or non-filing spouse Employed
pouse. If you are separated a ttach a separate sheet to this Part 1: Describe Emplo 1. Fill in your employment information. If you have more than one attach a separate page wiinformation about addition	nd your spouse is not filing form. On the top of any add ment job, h Employment status	iling jointly, and your spouse is li with you, do not include informat itional pages, write your name an Debtor 1 Employed Not employed	ving with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every questi Debtor 2 or non-filing spouse Employed Not employed
pouse. If you are separated a ttach a separate sheet to this Part 1: Describe Emplo 1. Fill in your employment information. If you have more than one attach a separate page wi information about addition employers. Include part-time, season.	ind your spouse is not filing form. On the top of any add ment job, h Cocupation I, or Employer's name udent Employer's address	iling jointly, and your spouse is li with you, do not include informat itional pages, write your name an Debtor 1 Employed Not employed Meter Reader City of Colonial Heights	Debtor 2 or non-filing spouse Employed Not employed Unemployed/Mansite Attendant
pouse. If you are separated a ttach a separate sheet to this part 1: Describe Employment information. If you have more than one attach a separate page wi information about addition employers. Include part-time, season self-employed work. Occupation may include setted to this part to the second self-employed work.	ind your spouse is not filing form. On the top of any add ment job, h Cocupation I, or Employer's name udent Employer's address	Debtor 1 Employed Not employed Meter Reader City of Colonial Heights 201 James Ave Po Box 3401 Colonial Heights, VA 2383	Debtor 2 or non-filing spouse Employed Not employed Unemployed/Mansite Attendant
pouse. If you are separated a ttach a separate sheet to this Part 1: Describe Emplo 1. Fill in your employment information. If you have more than one attach a separate page wi information about addition employers. Include part-time, seasons self-employed work. Occupation may include sor homemaker, if it applies	nd your spouse is not filing form. On the top of any add ment job, h Employment status al Occupation I, or Employer's name udent Employer's address	Debtor 1 Employed Not employed Meter Reader City of Colonial Heights 201 James Ave Po Box 3401 Colonial Heights, VA 2383	Debtor 2 or non-filing spouse Employed Not employed Unemployed/Mansite Attendant

more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 854.00 2,654.00 2. 3. Estimate and list monthly overtime pay. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 2,654.00 854.00

Official Form B 6I **Schedule I: Your Income** page 1

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Deb Deb	tor 1 tor 2	Kenneth R. Langston, Jr. Kimberly L. Langston		Case r	number (<i>if known</i>)	14-3161	8	
	Cor	by line 4 here	4.	For	Debtor 1		otor 2 or ng spouse 854.00	
	COL	line 4 here	٦.	Ψ	2,654.00	Ψ	654.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	524.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	124.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d. 5e.	Required repayments of retirement fund loans	5d. 5e.	\$	0.00	\$	0.00	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	ş—	243.00	\$	0.00 0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	· · —	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	891.00	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,763.00	\$	854.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c. 8d. 8e.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	\$ \$	0.00 0.00 0.00	\$ \$	0.00 0.00 0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.	Cal	culate monthly income. Add line 7 + line 9.	0. \$	1	,763.00 + \$	854	.00 = \$ 2,61	7.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	` ` ·	-	-			
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	deper			ted in Sch		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies				a. if it	12. \$ 2,61 Combined	
13	Do	you expect an increase or decrease within the year after you file this form?	,				monthly inco	me
10.	5 0	No.	•					
		Yes. Explain:						

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Fill	in this informatio	n to identify vo	our case:					
				l w		Ch	eck if this is:	
Deb	<u></u>	Kenneth R. L	angston	i, Jr.			An amended filing	
	ouse, if filing)	Kimberly L. I	_angston	1			A supplement sho	wing post-petition chapter the following date:
Unit	ed States Bankrupt	cy Court for the:	EASTE	RN DISTRICT OF VIRGIN	IIA		MM / DD / YYYY	
1	e number 14-3	1618					A separate filing for 2 maintains a separate	or Debtor 2 because Debtor arate household
Of	fficial Forr	m B 6J				ı		
S	chedule J	I· Your I	_ Exper	1989				12/13
Be info	as complete an	d accurate as e space is ne	possible.	. If two married people a ach another sheet to this	re filing together, b form. On the top o	oth are e	qually responsible titional pages, write	for supplying correct
Par 1.	t 1: Describe	e Your House	hold					
١.	□ No. Go to lir							
			in a separ	ate household?				
	■ No							
	_ :::	. Debtor 2 mus	st file a sep	oarate Schedule J.				
2.	Do you have d	lependents?	■ No					
	Do not list Deb	tor 1	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the							□ No
	dependents' na	imes.						☐ Yes
								□ No □ Yes
					-		_	□ No
								☐ Yes
							<u> </u>	□ No
	_							☐ Yes
3.	Do your exper expenses of p		han	No				
	yourself and y			Yes				
Den	+ O. Fatimat	- Va On mai:		h. F				
Est exp	imate your expe		our bankrı	uptcy filing date unless y				apter 13 case to report of the form and fill in the
the	lude expenses p value of such a ficial Form 6l.)	oaid for with i	non-cash d have inc	government assistance cluded it on <i>Schedule I:</i>	if you know Your Income		Your exp	enses
4.	The rental or h			uses for your residence. I or lot.	nclude first mortgag	e 4.	\$	610.00
	If not included	l in line 4:						
	4a. Real esta	ate taxes				4a.	\$	0.00
		, homeowner's	s, or renter	's insurance		4b.		0.00
	, ,			upkeep expenses		4c.	·	50.00
				dominium dues		4d.	·	0.00
5.	Additional mo	rtgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

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ebtor 2 . Utili t	Kenneth R. Langston, Jr.	_		14-31618
1 14:11:4	Kimberly L. Langston	Case num	per (if known)	14-31616
	Hoo:			
6a.	ties: Electricity, heat, natural gas	6a.	\$	275.00
6b.	Water, sewer, garbage collection	6b.	\$	45.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	220.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	7.	\$	600.00
	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	90.00
	conal care products and services	10.	\$	100.00
	ical and dental expenses	11.	\$	100.00
	sportation. Include gas, maintenance, bus or train fare.		•	100.00
	ot include car payments.	12.	\$	250.00
. Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
. Char	ritable contributions and religious donations	14.	\$	0.00
. Insu				
	ot include insurance deducted from your pay or included in lines 4 or 20.		_	
	Life insurance	15a.		0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	\$	150.00
	Other insurance. Specify:	15d.	\$	0.00
. Taxe Spec	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	16.	\$	0.00
	allment or lease payments:		-	
	Car payments for Vehicle 1	17a.	·	207.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	10.	\$	
Spec	er payments you make to support others who do not live with you.	19.	Φ	0.00
	तापुर. er real property expenses not included in lines 4 or 5 of this form or on Scho			
Otho		adula I. V	our Incomo	
				0.00
20a.	Mortgages on other property	20a.	\$	0.00
20a. 20b.	Mortgages on other property Real estate taxes	20a. 20b.	\$	0.00
20a. 20b. 20c.	Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance	20a. 20b. 20c.	\$ \$ \$	0.00 0.00
20a. 20b. 20c. 20d.	Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses	20a. 20b. 20c. 20d.	\$ \$ \$ \$	0.00 0.00 0.00
20a. 20b. 20c. 20d. 20e.	Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues	20a. 20b. 20c. 20d. 20e.	\$	0.00 0.00 0.00 0.00
20a. 20b. 20c. 20d. 20e.	Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses	20a. 20b. 20c. 20d.	\$	0.00 0.00 0.00
20a. 20b. 20c. 20d. 20e. Othe	Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: Emergency funds r monthly expenses. Add lines 4 through 21.	20a. 20b. 20c. 20d. 20e.	\$	0.00 0.00 0.00 0.00
20a. 20b. 20c. 20d. 20e. Othe	Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: Emergency funds	20a. 20b. 20c. 20d. 20e. 21.	\$	0.00 0.00 0.00 0.00 100.00
20a. 20b. 20c. 20d. 20e. Othe Your The	Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: Emergency funds r monthly expenses. Add lines 4 through 21. result is your monthly expenses. sulate your monthly net income.	20a. 20b. 20c. 20d. 20e. 21.	\$ \$ \$ \$ \$ * \$	0.00 0.00 0.00 0.00 100.00
20a. 20b. 20c. 20d. 20e. Other The Calc 23a.	Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: Emergency funds r monthly expenses. Add lines 4 through 21. result is your monthly expenses. rulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I.	20a. 20b. 20c. 20d. 20e. 21. 22.	\$ \$ \$ +\$ \$	0.00 0.00 0.00 0.00 100.00 2,817.00
20a. 20b. 20c. 20d. 20e. Other The Calc 23a.	Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: Emergency funds r monthly expenses. Add lines 4 through 21. result is your monthly expenses. sulate your monthly net income.	20a. 20b. 20c. 20d. 20e. 21.	\$ \$ \$ +\$ \$	0.00 0.00 0.00 0.00 100.00

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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United States Bankruptcy Court Eastern District of Virginia

In re	Kenneth R. Langston, Jr. Kimberly L. Langston	Case No.	14-31618	
		Debtor(s)	Chapter	7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting

	of 25	sheets, and that th	eets, and that they are true and correct to the best of my knowledge, information, and belief.					
Date	November	2, 2015	Signature	/s/ Kenneth R. Langston, Jr.				
				Kenneth R. Langston, Jr. Debtor				
Date	November	2, 2015	Signature	/s/ Kimberly L. Langston				
				Kimberly L. Langston				

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Joint Debtor

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B8 (Form 8) (12/08)

United States Bankruptcy Court Eastern District of Virginia

In re	Kenneth R. Langston, Jr. Kimberly L. Langston			Case No.	14-31618
			Debtor(s)	Chapter	7
PART	CHAPTER A - Debts secured by proper property of the estate. Att		must be fully co		
Proper	rty No. 1	ach additional pages if he	Cessary.)		
	tor's Name: t Credit Union			erty Securing Debt ersa, 8000 Miles	:
Proper	rty will be (check one):				
	l Surrendered	■ Retained			
	ining the property, I intend to (all Redeem the property) I Reaffirm the debt I Other. Explain		roid lien using 11	U.S.C. § 522(f)).	
-	l Claimed as Exempt		■ Not claimed	as exempt	
Attach	B - Personal property subject tadditional pages if necessary.)	to unexpired leases. (All thre	e columns of Part	t B must be complete	d for each unexpired lease.
	r's Name: age Envy	Describe Leased Programmer Membership	operty:	Lease will be U.S.C. § 365 ☐ YES	Assumed pursuant to 11 (p)(2): ■ NO
	re under penalty of perjury t al property subject to an une		intention as to a	any property of my	estate securing a debt and/or
Date _	November 2, 2015	Signature	/s/ Kenneth R. I Kenneth R. Lan Debtor		
Date _	November 2, 2015	Signature	/s/ Kimberly L. Kimberly L. Lar		

Joint Debtor

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United States Bankruptcy Court Eastern District of Virginia

In re	Kenneth R. Langston, Jr. Kimberly L. Langston	Case No.	14-31618
	Debtor(s)	Chapter	7
		_	
	AMENDMENT COVER SHEET	ľ	
Amendı	nent(s) to the following petition, list(s), schedule(s) or statement(s) are transm		
	Involuntary/Voluntary Petition [Specify reason for amendment:	1	
	Check if applicable: Soc. Sec. No. amended. [If applicable: An	original, signed (Official Form 21 was
	mailed/hand-delivered to the Clerk's office on*]		
	Summary of Schedules (Includes Statistical Summary of Certain Li	abilities and Relate	ed Data)
	Schedule A - Real Property		
	Schedule B - Personal Property		
	Schedule C - Property Claimed as Exempt Schedule D. F. on F. and (on list of Creditors on Equity Holders)	DEOLUDES CON	ADLIANCE WITH LOCAL
	Schedule D, E, or F, and/or list of Creditors or Equity Holders RULE 1009-1 (\$30.00 fee required if adding or deleting pre-petiti		
	classification of debt.) Check applicable statement(s):	on creations, chan	ging umounts owed or
	☐ Creditor(s) added ☐ Creditor(s) delete	ed	
	Change in amounts owed or classification of debt		
	No pre-petition creditors added/deleted, or amounts ow	ed or classification	of debt changed. [Docket:
	Amended Schedule(s) and/or Statement(s), List(s)-NO F	EE)	0 -
	☐ Post-petition creditors added (Schedule of Unpaid Debts		
	REMINDER: Conversion of Chapter 13 to Chapter 7 - only file	e Schedule of Unp	aid Debts.
	Schedule G- Executory Contracts and Unexpired Leases		
	Schedule H - Codebtors		
	 ✓ Schedule I - Current Income of Individual Debtor(s) ✓ Schedule J - Current Expenditures of Individual Debtor(s) 		
	Schedule 3 - Current Expenditures of marviadal Debiol(s)		
NOTE	The form "NOTICE TO CREDITOR(S) (RE AMENDMENT)" is still in	required when ad	ding or deleting creditors.
	lment of debtor(s) Social Security Number requires this cover sheet toge		
Statem	nt of Social Security Number(s) be electronically filed or submitted to th	e Clerk's Office f	or 'restricted" entry of the
amende	d Social Security Number into the case record.]		
	Statement of Financial Affairs		
√	Chapter 7 Individual Debtor's Statement of Intention		
	Chapter 11 List of Equity Security Holders		
	Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims		
	Disclosure of Compensation of Attorney for Debtor		
	Other:		
	NOTICE OF AMENDMENT(S) TO AFFECT	ED DADTIES	
Pursuan	to Federal Rule of Bankruptcy Procedure 1009(a) and Local Rule 1009-1, I		of the filing of the
	ent(s) checked above has been given this date to the United States Trustee, the		
	by the amendment as follows:	ie trastee in tims ea	se, and to any and an entities
	November 2, 2015		
	/s/ Richard J. Oulton for Ame		
	Richard J. Oulton for Americ	ca Law Group, Inc	•
	Attorney for Debtor(s) [or <i>Pro</i>	Se Debtor(s)]	
	State Bar No.: 29640	_	
	Mailing Address: America Lav		
		w Group, Inc.	
	2312 Boulev Colonial Hei	ghts, VA 23834	
	Telenhone No : 804-520-242		